

PTO/SB/30 (10-01)
Approved for use through 10/31/2002. OMB 0651-0031
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REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to: Commissioner for Patents Mail Stop: RCE Alexandria, Virginia 22313-1450

Application Number	09/847,032 / 5645			
Filing Date	April 30, 2001			
First Named Inventor	Lester S. Sanders			
Art Unit	2128			
Examiner Name	Thai Q. Phan			
Attorney Docket Number	X-858 US			

This is a Request for Continued Examination (RCE) under 37 C.F.R. 1.11 Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any uti 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USI	lity or plant application file	* *			
Submission required under 37 C.F.R. 1.114					
a. X Previously submitted					
 i. Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed (Any unentered amendment(s) referred to above will be entered). 	d on <u>Septen</u>	nber 27, 2006			
ii. Consider the arguments in the Appeal Brief or Reply Brief previously filed					
b. X Enclosed					
i. Amendment/Reply iii. Information Disclosu	``\``				
ii. Affidavit(s)/Declaration(s) iv. X Other <u>Fee Trans</u>	mittal; Return Rece	eipt Postcard			
2. Miscellaneous					
a. Suspension of action on the above-identified application is requested under 3 a period of months. (Period of suspension shall not exceed 3 months; Fee	37 C.F.R. § 1.103(c) for	r uired)			
b. Other					
3. Fees The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is file					
a. The Director is hereby authorized to charge the following fees, or credit any Deposit Account No. 24-0040	overpayments, to				
i. RCE fee required under 37 C.F.R. 1.17(e) in the amount of \$790.0011/01/2006 WA	SFAW1 00000065 24004	0 09847032			
ii. Extension of time fee (37 C.F.R. 1.136 and 1.17) . 01 FC:1801	790.00 DA				
b. Check in the amount of \$ enclosed	-				
c. Payment by credit card (Form PTO-2038 enclosed)					
WARNING: Information on this form may become public. Cre- be included on this form. Provide credit card information and	dit card information of authorization of	on should not PTO-2038.			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED					
Name (Print /Type) Keith A. Chanroo Registration No.	o. (Attorney/Agent)	36,480			
Signature Date	October 27	, 2006			
CERTIFICATE OF MAILING OR TRANSMISSION					
I hereby certify that this correspondence is being deposited with the United States Postal Service EXPRESS MAIL in an envelope addressed to: Commissioner For Patents, Mail Stop: RCE, P.O. facsimile transmitted to the U.S. Patent and Trademark Office on:	with sufficient postage as Box 1450, Alexandria, Vi	first class mail / rginia 22313-1450, or			
Name (Print/Type) Pat Tompkins					
Signature Tom Din Date	October 27	2006			

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Commissioner for Patents, Mail Stop: RCE, Alexandria, Virginia 22313-1450.

OCT 9 1 2006

PARADEMARY F

PTO/SB/17 (10-02)
Approved for use through 10-31-2002. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision

TOTAL AMOUNT OF PAYMENT (\$) 790.00

Com	plete if Known
Application / Conf. No.	09/847,032 / 5645
Filing Date	April 30, 2001
First Named Inventor	Lester S. Sanders
Examiner Name	Thai Q. Phan
Art Unit	2128
Attorney Docket No.	X-858 US
	Application / Conf. No. Filing Date First Named Inventor Examiner Name Art Unit

ME	THOD	OF PAYMENT (check	one)	1		EE CALCULATION (continued)	
1. X The any a	Commissi additional	ioner is hereby authorized to co fees required, and credit any c	narge indicated fees, over payments to:	Large Ent	3. ADDITIONAL FEES Large Entity Fee Fee		
Deposit Account		Code	(\$)	Fee Description	Fee Paid		
Deposit		24 0040		1051	130	Surcharge - late filing fee or oath	
Number	Account Number 24-0040		1052	50	Surcharge - late provisional filing fee or cover sheet.		
Deposit Account Name		XILINX, INC.		1812	2,520	For filing a request for exparte reexamination	
				1804	920*	Requesting publication of SIR prior to Examiner action	
			_	1805	1,840*	Requesting publication of SIR after Examiner action	
	FEE	CALCULATION		1251	120	Extension for reply within first month	
1. BAS	IC FILI	NG FEE		1252	450	Extension for reply within second month	
Large Er	ntity		i	1253	1020	Extension for reply within third month	
Fee	Fee	Fee Description	Fee	1254	1,530	Extension for reply within fourth month	
Paid Code	(\$)			1255	2,080	Extension for reply within fifth month	
1001	770	Utility filing fee		1401	500	Notice of Appeal	
1002	330	Design filing fee		1402	500	Filing a brief in support of an appeal	
1003	510	Plant filing fee		1403	1000	Request for oral hearing	
1004 105	790 160	Reissue filing fee Provisional filing fee		1451	1,510	Petition to institute a public use proceeding	
]				1452	110	Petition to revive - unavoidable	
		TOTAL (1) (\$)		1453	1,500	Petition to revive - unintentional	
2. EXTRA	A CLAII	W FEES FOR UTILITY		1501	1,400	Utility issue fee (or reissue)	
1		Extra bel		1460	130	Petitions to the Commissioner	
Total Claims Indep. Claims	30	ᆿᇭᅩᅛᆜᆛᇨ	= \$0	1807	50	Petitions related to provisional applications	
Multiple Depen	03 odent Clai		\$0	1806	180	Submission of Information Disclosure Stmt	
**or number pr		paid, if greater, For Reissues,	see below	8021	40	Recording each patent assignment per property (times number of properties)	
Large Entity Fee Fee Code (\$)		Fee Description		1809	790	Filing a submission after final rejection (37 CFR 1.129(a))	
1202 18 1201 86 1203 290		Claims in excess of 20 Independent claims in exc Multiple dependent claim,	f not paid	1810	790	For each additional invention to be examined (37 CFR 1.129(b))	\$790
1204 86 1205 18		**Reissue independent cla over original patent **Reissue claims in excess and over original patent	ims	1801	790	Request for Continued Examination (RCE)	
				Other fe	e (specify)		
s	SUBTO	TAL (2) (\$)	0.00	*Reduc	ed by Basi	c Filing Fee Paid SUBTOTAL (3) (\$)	790.00

SUBMITTED BY	Complete (if applicable)					
Name (Print/Type) Keith A. Chanroo	Registration No. (Attorney/Agent) 36,480	Telephone	408-879-7710			
Signature Signature		Date	10-27-2006			